

Initial: 12/6/00
Reviewed/revised: 7/1/11
Revision: 9

**MILWAUKEE COUNTY EMS
OPERATIONAL POLICY
REQUIRED EVALUATION BY**

Approved by: Kenneth Sternig, MS-EHS, BSN, EMT-P
Approved by: Ronald Pirrallo, MD, MHSA
Page 1 of 2

A MILWAUKEE COUNTY ALS UNIT

POLICY: If the first responding EMS unit determines after patient assessment, that ALS evaluation, treatment and transport are not required, the responding ALS or ILS unit may be cancelled.

BLS and ILS units must request a Milwaukee County paramedic evaluation for patients meeting the following criteria.

Note: This does not exclude any other patient from assessment by a Milwaukee County paramedic.

1. *An EMT, physician, physician's assistant, or nurse on scene requests ALS/paramedic transport. This does not include transports that meet established criteria for interfacility transports.*
2. Mechanism of injury includes a motor vehicle crash in which:
 - a. Estimated crash impact speed was 40 mph or greater
 - b. Prolonged or complicated extrication was required
 - c. Passenger compartment intrusion is greater than 12 inches
 - d. Another occupant in the same vehicle was killed
 - e. The patient was ejected from the vehicle
 - f. The vehicle rolled over onto the roof
 - g. The patient was on a motorcycle or bicycle with impact speed over 20 mph
 - h. A motorcycle or bicycle rider was thrown from the cycle
 - i. A pedestrian was struck by a motor vehicle
3. The adult patient (12 years or older) fell 20 feet or more OR a pediatric patient (less than 12 years old) fell 10 feet or more
4. Injuries that include:
 - a. Penetrating injury to the head, neck, chest, axilla, abdomen, back, buttocks, pelvis or groin
 - b. Flail chest
 - c. Burns to the face, airway, or body surface area greater than 18%
 - d. Two or more long bone fractures (femur, humerus)
 - e. Amputation above the wrist or ankle
 - f. New-onset paralysis of traumatic origin
5. Glasgow Coma Scale of 13 or less
6. Patient experiencing status or recurrent seizures
7. Suspected tricyclic overdose, regardless of the number taken or present signs/symptoms
8. Pregnant patient at 24 or more weeks gestation with vaginal bleeding
9. Experiencing complicated childbirth with any of the following:
 - a. Excessive bleeding
 - b. Amniotic fluid contaminated by fecal material
 - c. Multiple births
 - d. Premature imminent delivery
 - e. Abnormal fetal presentation (breech)
 - f. Prolapsed umbilical cord
 - g. Newborn with a pulse less than 140
 - h. Newborn flaccid or poor cry
10. Chief complaint of non-traumatic chest pain with any of the following:
 - a. Cardiac history - MI, angina, coronary bypass surgery, angioplasty or valve replacement, arrhythmia, pacemaker, automatic implanted cardiac defibrillator (AICD), bradycardia, tachycardia, heart surgery
 - b. Taking/prescribed two or more cardiac medications
 - c. Diabetes
 - d. Renal failure/dialysis
 - e. Cocaine use within the past 24 hours
 - f. Pain radiation to the neck, jaw or arm
 - g. Diaphoresis
 - h. Nausea/vomiting
 - i. Age 40 and older

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Page 2 of 2

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11. Age 50 or older with non-traumatic pain to the neck, jaw or arm and accompanied with any of the following:
 - a. Diaphoresis
 - b. Nausea/vomiting
12. Respiratory distress – Any patient with abnormal respiratory rate or pulse oximetry and any of the following:
 - a. Inability to speak in full sentences (if normally verbal)
 - b. Retractions
 - c. Cyanosis
 - d. Poor aeration
 - e. Accessory muscle use
 - f. Wheezing
 - g. Grunting
13. Abnormal vital signs with associated symptoms
14. History or physical examination reveals a potentially life-threatening situation
15. The BLS, ILS, or ALS private provider has initiated an EMT-Basic advanced procedure and interfacility criteria are not met.
16. Patients in which EMT-Basic advanced skills were initiated; these patients also require ALS transport:
 - a. Administration of albuterol **without** complete relief of symptoms (examples: wheezing, dyspnea)
 - b. Administration of aspirin
 - c. Administration of epinephrine **without** complete relief of symptoms (examples: wheezing, dyspnea, hypotension)
 - d. Assistance in self-administration of nitroglycerin
 - e. Administration of dextrose **without** complete relief of symptoms (example: altered level of consciousness after second dose of dextrose)
17. Known blood glucose level greater than 400 mg/dl. *** BLS providers must request ALS unit for a known blood sugar < 70mg/dl. ILS may treat a blood sugar <70mg/dl***
18. Any infant with a reported incident of an Apparent Life Threatening Event (ALTE), regardless of the infant's current status.

Abnormal Vital Signs

AGE	RESPIRATIONS	PULSE	BLOOD PRESSURE	Room Air Pulse Oximetry
Newborn	Poor cry	<140	CRT > 3 sec	< 94%
<1 year	<30 or >44	<100 or >160	CRT > 3 sec	< 94%
1 – 4 years	<20 or > 40	<90 or > 140	<80 or > 110 systolic	< 94%
5 – 11 years	<16 or >26	<60 or > 120	<80 or > 130 systolic	< 94%
12 – 15 years	<10 or > 28	<60 or > 130	<90 or >140 systolic	< 94%
Adults 16 years and older	<10 or > 28	<51 or > 130	<90 or >220 systolic OR >140 diastolic	< 94%

< means less than

> means greater than

CRT = capillary refill time